



PTO/SB/21 (09-04)

Dew

## TRANSMITTAL FORM

(To be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/807,462
Filing Date	March 23, 2004
First Named Inventor	Dewan, Sunil
Art Unit	2876
Examiner Name	Daniel St Cyr
Total Number of Pages in This Submission	Attorney Docket Number 020375-050600US

### ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Return Postcard
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> Copy of Search/Examination Report Corresponding to the PCT Application
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
	<b>Remarks</b>	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

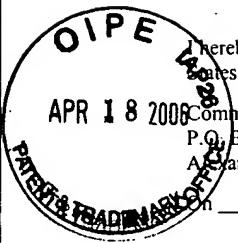
### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Darin J. Gibby		
Date	April 13, 2006	Reg. No.	38,464

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature		
Typed or printed name	Maria Gabor	Date
		April 13, 2006



I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

APR 18 2008  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

PATENT  
Attorney Docket No.: 020375-050600US

TOWNSEND and TOWNSEND and CREW LLP

By:

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Sunil Dewan et al.

Application No.: 10/807,462

Filed: March 23, 2004

For: SYSTEM AND METHOD FOR  
PREPARING RF DEVICES FOR  
DELIVERY AND VERIFYING  
DELIVERY INFORMATION

Examiner: Daniel St Cyr

Art Unit: 2876

INFORMATION DISCLOSURE  
STATEMENT UNDER 37 CFR §1.97 and  
§1.98

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

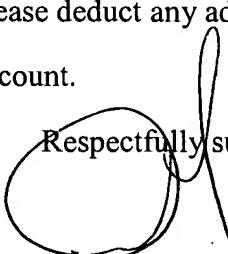
Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are not enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

Also enclosed is a copy of the Search/Examination report corresponding to the PCT application.

As provided for by 37 CFR §1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

Applicant believes that no fee is required for submission of this statement. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,  
  
Darin J. Gibby  
Reg. No. 38,464

TOWNSEND and TOWNSEND and CREW LLP  
Two Embarcadero Center, Eighth Floor  
San Francisco, California 94111-3834  
Tel: 303-571-4000  
Fax: 303-571-4321  
DJG:cc  
Unsaved Document



Substitute for form 1449A&B/PTO				<b>Complete if Known</b>	
				<i>Application Number</i>	10/807,462
				<i>Filing Date</i>	March 23, 2004
				<i>First Named Inventor</i>	Dewan, Sunil
				<i>Art Unit</i>	2876
				<i>Examiner Name</i>	Daniel St Cyr
Sheet	1	of	1	<i>Attorney Docket Number</i>	020375-050600US

<b>U.S. PATENT DOCUMENTS</b>					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number Number Kind Code <sup>2</sup> ( <i>if known</i> )	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	AA	US-4,106,062	08-08-1978	Foote	
	AB	US-5,518,122	05-21-1996	Tilles et al.	
	AC	US-6,912,398	06-28-2005	Domnitz	
	AD	US-2005/0177480	08-11-2005	Huang	

<b>FOREIGN PATENT DOCUMENTS</b>							
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup> <input type="checkbox"/>
		Country Code <sup>3</sup>	Number <sup>4</sup>				
	AE						<input type="checkbox"/>
	AF						<input type="checkbox"/>

<b>NON PATENT LITERATURE DOCUMENTS</b>								
Examiner Initials *	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.				T <sup>2</sup> <input type="checkbox"/>		
	BA						<input type="checkbox"/>	
	BB						<input type="checkbox"/>	

Examiner Signature	Date Considered
--------------------	-----------------

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>Applicant is to place a check mark here if English language Translation is attached.